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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	■ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's	John First name	Cheryl First name A
	license or passport).	Middle name	Middle name
	Bring your picture identification to your meeting with the trustee.	Schaefer Last name and Suffix (Sr., Jr., II, III)	Schaefer Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-6387	xxx-xx-7702

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Debtor 1 **John Schaefer**Debtor 2 **Cheryl A Schaefer**

Case number (if known)

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	I have not used any business name or EINs. Business name(s) EINs	■ I have not used any business name or EINs. Business name(s)
Where you live	1214 Alexander Pl	If Debtor 2 lives at a different address:
	Streamwood, IL 60107 Number, Street, City, State & ZIP Code Cook	Number, Street, City, State & ZIP Code
	County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. □ I have another reason. Explain. (See 28 U.S.C. § 1408.)
	Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Where you live Why you are choosing this district to file for	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Business name(s) EINs Where you live 1214 Alexander PI Streamwood, IL 60107 Number, Street, City, State & ZIP Code Cook County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number, P.O. Box, Street, City, State & ZIP Code Check one: Why you are choosing this district to file for bankruptcy Check one: I have another reason.

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John Schaefer Debtor 1 Debtor 2 Cheryl A Schaefer Case number (if known) Part 2: Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under ☐ Chapter 7 ☐ Chapter 11 ☐ Chapter 12 Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for ■ No. bankruptcy within the last 8 years? ☐ Yes. When Case number District When District Case number District When Case number 10. Are any bankruptcy No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Debtor Relationship to you When District Case number, if known Debtor Relationship to you When Case number, if known District 11. Do you rent your Go to line 12. No. residence? Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? □ Yes. No. Go to line 12.

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this

bankruptcy petition.

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	otor 1 John Schaefer otor 2 Cheryl A Schaefer	-	Docum	Case number (if known)
Par	22 Bonort About Any Ru	oinocco	You Own as a Sole Proprie	tor
Гаг	15. Report About Any Bu	511162262	Tou Own as a Sole Proprie	HOT
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.	
		☐ Yes.	Name and location of bus	siness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, Sta	
	it to this petition.			ox to describe your business:
			☐ Health Care Busi	ness (as defined in 11 U.S.C. § 101(27A))
			☐ Single Asset Rea	I Estate (as defined in 11 U.S.C. § 101(51B))
			☐ Stockbroker (as o	defined in 11 U.S.C. § 101(53A))
			☐ Commodity Broke	er (as defined in 11 U.S.C. § 101(6))
			☐ None of the abov	е
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	s. If you indicate that you are	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	■ No.	I am not filing under Cha	pter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter Code.	11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	Have Any	Hazardous Property or Ar	ny Property That Needs Immediate Attention
14.	Do you own or have any	■ No.		
	property that poses or is alleged to pose a threat of imminent and	☐ Yes.	What is the hazard?	
	identifiable hazard to public health or safety? Or do you own any property that needs		If immediate attention is	
	immediate attention?		needed, why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	
				Number, Street, City, State & Zip Code

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Debtor 1 John Schaefer
Cheryl A Schaefer Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

□ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 17-08067 Doc 1 Filed 03/15/17 Entered 03/15/17 11:31:28 Desc Main Document Page 6 of 83

John Schaefer Debtor 1 Debtor 2 Cheryl A Schaefer Case number (if known) Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses ☐ Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ☐ No are paid that funds will ☐ Yes be available for distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 50-99 owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10.000.000.001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100.000.001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. For you If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ John Schaefer /s/ Cheryl A Schaefer John Schaefer Cheryl A Schaefer Signature of Debtor 1 Signature of Debtor 2 Executed on March 15, 2017 Executed on March 15, 2017 MM / DD / YYYY MM / DD / YYYY

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John Schaefer Cheryl A Schaefer	Case number (if known)	
- Charles Condo. Co.		

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Sandra	Levitt	Date	March 15, 2017
Signature of	Attorney for Debtor		MM / DD / YYYY
Sandra Le	vitt		
Printed name			
Zalutsky 8	k Pinski, Ltd.		
Firm name			
111 W. Wa	ıshinaton		
Suite 1550	_		
Chicago, I	L 60602		
	City, State & ZIP Code		
Contact phone	312-782-9792	Email address	admin@ZAPLawFirm.com
6257558			
Bar number & St	tate		

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		DOCUM	<u>eni Pade 8 di 8.</u>	<u>.3</u>	
Fill in this infor	mation to identify your	case:			
Debtor 1	John Schaefer				
	First Name	Middle Name	Last Name		
Debtor 2	Cheryl A Schaefe	er			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an amended filing
					_

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file

		Your a	ssets of what you own
		value	or what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	195,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	20,070.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	215,070.00
Pa	t 2: Summarize Your Liabilities		
			iabilities It you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	245,822.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	27,000.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	135,532.20
	Your total liabilities	\$	408,354.20
Pa	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	6,102.71
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,732.00
Pa	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sc	hedules.
7.	■ Yes What kind of debt do you have?		

- household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 John Schaefer
Debtor 2 Cheryl A Schaefer

Case number (if known)

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

9,004.49

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	27,000.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	77,160.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	104,160.00

	Ca	se 17-0806	7 Doc 1		03/15/17 ument	Entered 03/15/17 Page 10 of 83	11:31:28	Desc	Main
Fill	in this inforr	nation to identify	your case and t			T MAC. TO OF OS			
Del	otor 1	John Schae		le Name		Last Name			
	otor 2 ouse, if filing)	Cheryl A Sc First Name		le Name		Last Name			
Uni	ted States Ba	nkruptcy Court for	the: NORTHER	RN DISTE	RICT OF ILLIN	NOIS			
Cas	se number _					-			Check if this is an amended filing
n ea nink nfor	chedul ach category, s it fits best. B mation. If mor wer every ques	e as complete and e space is needed, tion.	roperty lescribe items. List accurate as possib attach a separate s	le. If two isheet to th	married people is form. On the	n asset fits in more than one c e are filing together, both are e e top of any additional pages, v n or Have an Interest In	qually responsible	for supply	ing correct
. D	o vou own or l	ave any legal or ed	uitable interest in	anv reside	ence. buildina.	land, or similar property?			
	No. Go to Par			,	3 ,	, , , , , , , , , , , , , , , , , , ,			
	Yes. Where i	s the property?							
1.1	1214 Alex	ander Pl		What		? Check all that apply			
		if available, or other des	scription		Single-family had been been been been been been been bee		the amount of any	secured cla	or exemptions. Put hims on Schedule D: secured by Property.
	Streamwo	od IL	60107-0000		Manufactured Land	or mobile home	Current value of tentire property?	ро	urrent value of the ortion you own?
	City	State	ZIP Code	Uho l	Investment pro Timeshare Other nas an interest Debtor 1 only	in the property? Check one		ire of your ble, tenancy nown.	\$195,000.00 ownership interest y by the entireties, or
	Cook				Debtor 2 only	-		<u>'</u>	
	County				Debtor 1 and I At least one of	the debtors and another ou wish to add about this item,	Check if this (see instructions such as local		nity property

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here......=>

\$195,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

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Debto Debto		Cheryl A Schaefer	Ca	ase number (if known)	
Ca	rs, vans,	trucks, tractors, sport utility	vehicles, motorcycles		
	Nο				
_ ·					
	100				
3.1	Make:	Dodge	Who has an interest in the property? Check one		claims or exemptions. Put
	Model:	Carava	☐ Debtor 1 only		red claims on Schedule D: aims Secured by Property.
	Year:	2016	☐ Debtor 2 only	Current value of the	Current value of the
	Approxir	mate mileage: 2500	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other in	formation:	☐ At least one of the debtors and another		
			Check if this is community property (see instructions)	\$15,000.00	\$15,000.00
3.2	Make:	Pontiac	Who has an interest in the property? Check one	Do not deduct secured of	claims or exemptions. Put
J.Z	Model:	G6	Debtor 1 only		red claims on Schedule D: aims Secured by Property.
	Year:	2006	Debtor 2 only		
	Approxir	mate mileage: 15000		Current value of the entire property?	Current value of the portion you own?
		formation:	☐ At least one of the debtors and another		
	Purcha	ased new	_	¢720.00	¢720.00
			☐ Check if this is community property (see instructions)	\$720.00	\$720.00
Exa	amples: B No		s and other recreational vehicles, other vehicles, and watercraft, fishing vessels, snowmobiles, motorcycle a		
Exa	amples: B No				
Exa	amples: B No Yes dd the dd	loats, trailers, motors, persona		ny entries for	\$15,720.00
Exa	amples: B No Yes dd the do	olats, trailers, motors, personal blar value of the portion you have attached for Part 2. We	own for all of your entries from Part 2, including arite that number here	ny entries for	\$15,720.00
Exa	nmples: B No Yes dd the do tges you Descri	ollar value of the portion you have attached for Part 2. We be Your Personal and Househo	own for all of your entries from Part 2, including arite that number here	ny entries for	\$15,720.00 Current value of the portion you own? Do not deduct secured claims or exemptions.
Exact Signature of the control of th	mmples: B No Yes dd the dd gges you Descri ou own d usehold camples: No	bollar value of the portion you have attached for Part 2. We be Your Personal and Househo or have any legal or equitable goods and furnishings Major appliances, furniture, line	own for all of your entries from Part 2, including arite that number here	ny entries for	Current value of the portion you own? Do not deduct secured
Example Exampl	mmples: B No Yes dd the dd gges you Descri ou own d usehold camples: No	bollar value of the portion you have attached for Part 2. We be Your Personal and Househo or have any legal or equitable goods and furnishings	own for all of your entries from Part 2, including arite that number here	ny entries for	Current value of the portion you own? Do not deduct secured
Exact Acc. pace	mmples: B No Yes dd the dd gges you Descri ou own d usehold camples: No	coats, trailers, motors, personal coats, trailers, motors, personal collar value of the portion you have attached for Part 2. With the Your Personal and Househood have any legal or equitable goods and furnishings Major appliances, furniture, linescribe	own for all of your entries from Part 2, including arite that number here	ny entries for	Current value of the portion you own? Do not deduct secured claims or exemptions.
Ele E	mmples: B No Yes dd the dd gges you Descri ou own d wsehold camples: No Yes. De cetronics camples:	bollar value of the portion you have attached for Part 2. We be Your Personal and Househo or have any legal or equitable goods and furnishings Major appliances, furniture, linescribe 7 rooms nor Televisions and radios; audio, including cell phones, camera	own for all of your entries from Part 2, including arite that number here	ny entries for	Current value of the portion you own? Do not deduct secured claims or exemptions.
Ele E	mmples: B No Yes dd the dd gges you Descri ou own d wsehold camples: No Yes. De cetronics camples:	bollar value of the portion you have attached for Part 2. We be Your Personal and Househoor have any legal or equitable goods and furnishings Major appliances, furniture, linescribe 7 rooms nor Televisions and radios; audio, including cell phones, cameral escribe	own for all of your entries from Part 2, including arite that number here	ny entries for	Current value of the portion you own? Do not deduct secured claims or exemptions.

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

■ No

Case 17-08067 Doc 1 Filed 03/15/17 Entered 03/15/17 11:31:28 Desc Main Page 12 of 83 Document John Schaefer Debtor 1 Debtor 2 Cheryl A Schaefer Case number (if known) ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No ■ Yes. Describe..... Normal used personal clothing \$2,000.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$4,000.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition No ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes..... Checking & **Credit Union** \$150.00 Savings 17.1. Payee account for **Social Security for** \$200.00 **Harris Bank**

17.2.

son

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	ebtor 1 ebtor 2	John Schaefe Cheryl A Sch		Document	Page 13 01 03	Case number (if known)	
18.		mutual funds, o	or publicly traded stocks investment accounts with		ney market accounts	· · · · · · · · ·	
	■ No □ Yes		Institution or issu	er name:			
19.	Non-pu joint ve		ock and interests in inco	rporated and uninco	orporated businesse	s, including an interest in	an LLC, partnership, and
	■ No						
	☐ Yes.	Give specific info	ormation about them Name of entity:			% of ownership:	
20.	Negotia Non-ne	able instruments	orate bonds and other no include personal checks, ents are those you cannot	cashiers' checks, pror	missory notes, and mo	oney orders.	
	■ No □ Yes. 0	Give specific info	rmation about them Issuer name:				
21.		nent or pension les: Interests in II), 403(b), thrift saving	s accounts, or other p	ension or profit-sharing plan	s
		List each account	t separately. Type of account:	Institution n	ame:		
22.	Your sh Examp		d deposits you have made			om a company communications companies,	or others
	■ No □ Yes			Institution n	ame or individual:		
23.	Annuiti	es (A contract for	r a periodic payment of m	oney to you, either for	life or for a number o	f years)	
	☐ Yes	Iss	suer name and description	ı .			
24.			n IRA, in an account in a 29A(b), and 529(b)(1).	a qualified ABLE pro	ogram, or under a qu	alified state tuition progra	m.
	Yes	Ins	stitution name and descrip	tion. Separately file th	ne records of any inter	rests.11 U.S.C. § 521(c):	
25.	Trusts, ■ No	equitable or fut	ure interests in property	(other than anythin	g listed in line 1), an	d rights or powers exercis	able for your benefit
	☐ Yes.	Give specific info	ormation about them				
26.			ademarks, trade secrets, ain names, websites, prod			nts	
	_	Give specific info	ormation about them				
27.			and other general intanginits, exclusive licenses, co		n holdings, liquor licer	nses, professional licenses	
	☐ Yes.	Give specific info	ormation about them				
M	oney or p	property owed to	o you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	_	unds owed to yo	ou				
	■ No □ Yes. 0	Give specific info	rmation about them, inclu	ding whether you alre	ady filed the returns a	nd the tax years	

Official Form 106A/B Schedule A/B: Property page 4

		Case 17-08067	Doc 1	Filed 03/15/17 Document	Entered 03/15/17 11:31:28 Page 14 of 83	Desc Main		
Debtor Debtor	-	John Schaefer Cheryl A Schaefer			Case number (if known)			
Ex ■ N	9. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ■ No □ Yes. Give specific information							
Ex ■ N	amp lo	imounts someone owes y les: Unpaid wages, disabil benefits; unpaid loans Give specific information	ity insurance s you made to	payments, disability ben someone else	efits, sick pay, vacation pay, workers' compe	nsation, Social Security		
<i>Ex</i> □ N	amp lo				HSA); credit, homeowner's, or renter's insurar	nce		
■ Y	es. I	Name the insurance compa Com	any of each p npany name:	olicy and list its value.	Beneficiary:	Surrender or refund value:		
		Teri	m policy, no	cash value		\$0.00		
If y soil ■ N □ Y 33. Cla Ex ■ N □ Y 34. Oth ■ N □ Y 35. Any	ou a meolo lo	ne has died. Give specific information against third parties, wholes: Accidents, employment Describe each claim	nether or not nt disputes, in ted claims of	et proceeds from a life in you have filed a lawsu surance claims, or rights	isurance policy, or are currently entitled to reco			
		he dollar value of all of your tall of your 4. Write that number h			ny entries for pages you have attached	\$350.00		
Part 5:	Des	scribe Any Business-Related	l Property You	Own or Have an Interest	In. List any real estate in Part 1.			
■ No	. Go	own or have any legal or equesto Part 6. o to line 38.	itable interest	in any business-related p	roperty?			
Part 6:		scribe Any Farm- and Comm ou own or have an interest in fa			n or Have an Interest In.			
=	No.	own or have any legal of Go to Part 7. Go to line 47.	r equitable ir	terest in any farm- or o	commercial fishing-related property?			

Official Form 106A/B Schedule A/B: Property page 5

Describe All Property You Own or Have an Interest in That You Did Not List Above

Part 7:

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Debt Debt		John Schaefer Cheryl A Schaefer		Case number (if known)	
		have other property of any kind you did not already list bles: Season tickets, country club membership	?		
_		Give specific information			
54.	Add tl	he dollar value of all of your entries from Part 7. Write th	at number here		\$0.00
Part	8:	List the Totals of Each Part of this Form			
55.	Part 1	: Total real estate, line 2			\$195,000.00
56.	Part 2	: Total vehicles, line 5	\$15,720.00		<u> </u>
57.	Part 3	: Total personal and household items, line 15	\$4,000.00		
58.	Part 4	: Total financial assets, line 36	\$350.00		
59.	Part 5	: Total business-related property, line 45	\$0.00		
60.	Part 6	: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7	: Total other property not listed, line 54 +	\$0.00		
62.	Total	personal property. Add lines 56 through 61	\$20,070.00	Copy personal property total	\$20,070.00
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$215,070.00

Official Form 106A/B Schedule A/B: Property page 6

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		IAAAIIII		
Fill in this infor	mation to identify your	case:		
Debtor 1	John Schaefer			
	First Name	Middle Name	Last Name	
Debtor 2	Cheryl A Schaefe	er		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exe
--

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
	Copy the value from Schedule A/B	Ched	ck only one box for each exemption.	
1214 Alexander PI Streamwood, IL 60107 Cook County	\$195,000.00		\$0.00	735 ILCS 5/12-901
Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
2006 Pontiac G6 150000 miles Purchased new	\$720.00		\$0.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit	
7 rooms normal used furniture Line from Schedule A/B: 6.1	\$1,400.00		\$1,400.00	735 ILCS 5/12-1001(b)
			100% of fair market value, up to any applicable statutory limit	
DVD player, computer, TV Line from Schedule A/B: 7.1	\$600.00		\$600.00	735 ILCS 5/12-1001(b)
Ellio II oli i osinodalo 702. FFI			100% of fair market value, up to any applicable statutory limit	
Normal used personal clothing Line from Schedule A/B: 11.1	\$2,000.00		\$2,000.00	735 ILCS 5/12-1001(a)
Ellic Holli Geriodalo FVD. 1111			100% of fair market value, up to any applicable statutory limit	

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Cheryl A Schaefer Case number (if known) Debtor 2 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B **Checking & Savings: Credit Union** 735 ILCS 5/12-1001(b) \$150.00 \$150.00 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit Payee account for Social Security for 735 ILCS 5/12-1001(b) \$200.00 \$200.00 son: Harris Bank 100% of fair market value, up to Line from Schedule A/B: 17.2 any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? Yes

Debtor 1

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	Document Page	<u>: 18 of 83</u>		
Fill in this information to identify yo	ur case:			
Debtor 1 John Schaefer First Name	Middle Name Last Nam	00	-	
		ie .		
Debtor 2 (Spouse if, filing) Cheryl A Schae First Name	Middle Name Last Nam	ne	-	
United States Bankruptcy Court for the	NORTHERN DISTRICT OF ILLINOIS		_	
Case number (if known)			_	if this is an led filing
Official Form 106D				
Schedule D: Creditors	s Who Have Claims Secu	red by Propert	y	12/15
	If two married people are filing together, both a out, number the entries, and attach it to this for			
1. Do any creditors have claims secured b	by your property?			
☐ No. Check this box and submit	this form to the court with your other schedule	es. You have nothing else	to report on this form.	
Yes. Fill in all of the information	•	3		
	below.			
Part 1: List All Secured Claims		. Column A	Column B	Column C
	more than one secured claim, list the creditor sepa s a particular claim, list the other creditors in Part 2. tical order according to the creditor's name.	rately	Value of collateral that supports this claim	Unsecured portion
2.1 Consumer Portfolio Svc	Describe the property that secures the claim:	\$23,578.00	\$15,000.00	\$8,578.00
Creditor's Name	2016 Dodge Carava 25000 miles			
Attn: Bankruptcy 19500 Jamboree Rd	As of the date you file, the claim is: Check all th	at		
Irvine, CA 92612	apply. Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
ramson, energi, eny, etate a zip eess	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage	or secured		
Debtor 2 only	car loan)			
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lie	en)		
\square At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred May 2016	Last 4 digits of account number 58	883		
2.2 PLS	Describe the property that secures the claim:	\$800.00	\$720.00	\$80.00
Creditor's Name	2006 Pontiac G6 150000 miles		Ψ120.00	Ψ00.00
	Purchased new			
7300 N. Barrington Rd	As of the date you file, the claim is: Check all th apply.	at		
Hanover Park, IL 60133	☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	■ An agreement you made (such as mortgage of	or secured		
Debtor 2 only	car loan)			
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lie	en)		
lacksquare At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred September	Last 4 digits of account number			

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Debtor 1	John Scha	aefer			Case	e number (if know)		
	First Name	Middle N	lame	Last Name				
Debtor 2	Cheryl A S	Schaefer						
	First Name	Middle N	lame	Last Name				
	lls Fargo H	m Mortgag	Describe the	property that secures the o	laim:	\$221,444.00	\$195,000.00	\$26,444.00
Cred	itor's Name		1214 Alex 60107 Co	ander PI Streamwood ok County	, IL			
8480 Stagecoach Cir Frederick, MD 21701		As of the dat apply. Contingen	e you file, the claim is: Chec	k all that				
Num	ber, Street, City, S	State & Zip Code	☐ Unliquidat☐ Disputed☐	ed				
Who owe	s the debt? C	heck one.	Nature of lie	n. Check all that apply.				
☐ Debtor 1 only ☐ Debtor 2 only		An agreen car loan)	nent you made (such as mort	gage or secured				
Debtor	1 and Debtor 2	only	☐ Statutory I	en (such as tax lien, mechan	ic's lien)			
☐ At leas	t one of the deb	tors and another	☐ Judgment	lien from a lawsuit				
☐ Check if this claim relates to a community debt		elates to a	Other (inc	uding a right to offset)				
Date debt	was incurred	Opened 08/06 Last Active 4/10/14	l ast 4	digits of account number	8437			
Add the	dollar value of	f your entries in C	Column A on th	s page. Write that number I		\$245,822.		
	tne last page (at number here	•	trie dollar valu	e totals from all pages.		\$245,822.	00	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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	00	100 17 00007 1000 1	Document	Page 20 of	83	.20 D000 IV	iam
Fill in	this inforr	nation to identify your case:					
Debto	nr 1	John Schaefer					
Dobto	,, ,		Middle Name	Last Name			
Debto	or 2	Cheryl A Schaefer					
(Spouse	e if, filing)		Middle Name	Last Name			
United	d States Ba	nkruptcy Court for the: NOR	THERN DISTRICT OF ILL	INOIS			
Case (if know	number _					☐ Check	if this is an
						amend	ed filing
Scheduscheduscheduscheduscheduscheduscheduscheduscheduschen ame and Part 1. Do	edule E complete an ecutory coni ule G: Execu ule D: Credit tach the Cor and case nui List A o any credite l No. Go to F l Yes. st all of you entify what ty possible, list th	n 106E/F E/F: Creditors Who H dracts or unexpired leases that country Contracts and Unexpired Leasers who Have Claims Secured by the contract of the contrac	for creditors with PRIORIT' uld result in a claim. Also lises (Official Form 106G). De Property. If more space is rule in the property of the	Y claims and Part 2 fi st executory contract o not include any cre needed, copy the Par port in a Part, do not the rity unsecured claim, li s, list that claim here a you have more than tw	ts on Schedule A/B: Feditors with partially st you need, fill it out, file that Part. On the t	Property (Official For ecured claims that a number the entries in op of any additional by for each claim. For nd nonpriority amount	m 106A/B) and on ire listed in in the boxes on the pages, write your each claim listed, is. As much as
		ation of each type of claim, see the in			Total claim	Priority	Nonpriority
						amount	amount
2.1		Revenue Service	Last 4 digits of accour	nt number	\$7,000.00	\$7,000.00	\$0.00
	•	editor's Name the Treasury	When was the debt inc	curred?			
	P.O. Bo	•	When was the debt inc			-	
		lphia, PA 19101					
		treet City State Zlp Code	As of the date you file,	the claim is: Check	all that apply		
١	Nho incurre	d the debt? Check one.	☐ Contingent				
[Debtor 1 o	only	☐ Unliquidated				
[□ Debtor 2 only □ Disputed						
_	■ Debtor 1 and Debtor 2 only Type of PRIORITY unsecured claim:						
	☐ At least one of the debtors and another ☐ Domestic support obligations						
	A reast title of the debtors and another						
		this claim is for a community debt					
_		subject to offset?	☐ Claims for death or p	bersonai injury wnile yo	ou were intoxicated		
	No D		Other. Specify	44!			
L	☐ Yes		20'	14 income taxes			

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Debtor 2 Cheryl A Schaefer	Case number (if know)					
2.2 Internal Revenue Service	Last 4 digits of account number	\$20,000.00	\$0.00 \$20,000.00			
Priority Creditor's Name Dept of the Treasury P.O. Box 7346	When was the debt incurred?	2011				
Philadelphia, PA 19101 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply				
Who incurred the debt? Check one.	☐ Contingent					
☐ Debtor 1 only	☐ Unliquidated					
☐ Debtor 2 only	☐ Disputed					
■ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cl	aim:				
☐ At least one of the debtors and another	☐ Domestic support obligations					
☐ Check if this claim is for a community debt	Taxes and certain other debts	you owe the government				
Is the claim subject to offset?	☐ Claims for death or personal in	-				
■ No	☐ Other. Specify					
Yes						
 List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each c than one creditor holds a particular claim, list the other Part 2. 	laim. For each claim listed, identify w	hat type of claim it is. Do not list claims	already included in Part 1. If more			
4.1 A/r Concepts	Last 4 digits of account numl	per 8070	\$522.00			
Nonpriority Creditor's Name 18-3 E Dundee Rd Barrington, IL 60010	When was the debt incurred?					
Number Street City State Zlp Code	As of the date you file, the cla	nim is: Check all that apply				
Who incurred the debt? Check one.	_					
Debtor 1 only	☐ Contingent					
Debtor 2 only	Unliquidated					
☐ Debtor 1 and Debtor 2 only	☐ Disputed					
\square At least one of the debtors and another	Type of NONPRIORITY unsec	ured claim:				
☐ Check if this claim is for a community	☐ Student loans					
debt Is the claim subject to offset?	□ Obligations arising out of a report as priority claims	separation agreement or divorce that y	ou did not			
■ No	<u>-</u>	naring plans, and other similar debts				
□ Yes	Other. Specify Charles	• •				
□ 169	Otner. Specify	o oranginin or mu oc				

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Cheryl A Schaefer	Case number (if know)	
A/R Concepts Inc.	Last 4 digits of account number 1480	\$522.08
Nonpriority Creditor's Name 18-3 E. Dundee Rd. Ste. 330 Barrington, IL 60010	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical Collection	
Amazon Credit Plan	Last 4 digits of account number	\$0.00
Nonpriority Creditor's Name Processing Center Des Moines, IA 50364	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Other. Specify	
Americash Loans	Last 4 digits of account number	\$5,003.00
Nonpriority Creditor's Name 880 Lee Street Suite 302	When was the debt incurred?	
Des Plaines, IL 60016 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	• • • • • • • • • • • • • • • • • • • •	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
_	□ Student loans	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
■ NO	—	

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Debt	Cheryl A Schaefer		Case number (if know)	
4.5	ARS/Account Resolution Specialist Nonpriority Creditor's Name	Last 4 digits of account number	2773	\$612.00
	Po Box 459079 Sunrise, FL 33345	When was the debt incurred?	Opened 11/15	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Collection Associates	Attorney Midwest Emergency L	
4.6	ARS/Account Resolution Specialist	Last 4 digits of account number	1807	\$409.00
	Nonpriority Creditor's Name Po Box 459079 Sunrise, FL 33345	When was the debt incurred?	Opened 03/15	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Associates	Attorney Midwest Emergency L	
4.7	Associated General Surgeons, SC Nonpriority Creditor's Name	Last 4 digits of account number		\$40.00
	25 North Winfield Road Suite 410 Winfield, IL 60190	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure		
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		

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Deb	or 2 Cheryl A Schaefer	<u></u>	Case number (if know)	
4.8	Atg Credit Llc	Last 4 digits of account number	5184	\$22.00
	Nonpriority Creditor's Name 1700 W Cortland St Ste 2	When was the debt incurred?	Opened 09/11	
	Chicago, IL 60622 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Associates	Attorney Suburban Lung	
4.9	Atg Credit Llc	Last 4 digits of account number	8343	\$15.00
	Nonpriority Creditor's Name 1700 W Cortland St Ste 2	When was the debt incurred?	Opened 09/11	
	Chicago, IL 60622			
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing		
	Yes	Other. Specify Consultant	Attorney Winfield Radiology s	
4.1)	Avant Credit, Inc	Last 4 digits of account number	9158	\$0.00
	Nonpriority Creditor's Name 640 N La Salle St Suite 535	When was the debt incurred?	Opened 01/14 Last Active 1/28/15	
	Chicago, IL 60654 Number Street City State Zlp Code	As of the date you file, the claim	is: Chock all that apply	
	Who incurred the debt? Check one.	710 of the date you me, the claim	or check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharir	on plans, and other similar dobts	
	Yes	Other. Specify Unsecured		

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	John Schaefer Cheryl A Schaefer	Case number (if know)		
1	Bank Of America	Last 4 digits of account number	7472	\$0.00
F C	Ionpriority Creditor's Name Ic4-105-03-14 Po Box 26012 Greensboro, NC 27410 Iumber Street City State Zlp Code Vho incurred the debt? Check one.	When was the debt incurred? As of the date you file, the claim	Opened 05/90 Last Active 8/26/06 s: Check all that apply	
[[] d Is	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community ebt sthe claim subject to offset? No	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separeport as priority claims ☐ Debts to pension or profit-sharin	ration agreement or divorce that you did not	
_	Yes	Other. Specify Credit Card		
F C	Cadence Medical Group Ionpriority Creditor's Name PO Box 409 Carol Stream, IL 60197 Iumber Street City State Zlp Code	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim	s: Check all that apply	\$32.00
[] •	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured	1 claim:	
E d Is	At least one of the debtors and another Check if this claim is for a community ebt sthe claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims ☐ Debts to pension or profit-sharing	ration agreement or divorce that you did not g plans, and other similar debts	
	Yes	Other. Specify		
, N	Calvary Portfolio Services Ionpriority Creditor's Name IOO Summit Lake Ste 400 Valhalla, NY 10595	Last 4 digits of account number When was the debt incurred?	2796 Opened 12/12	\$513.00
V V E E C C d d Is	Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community ebt No Yes	report as priority claims Debts to pension or profit-sharing	d claim: ration agreement or divorce that you did not	

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Debtor Debtor	1 John Schaefer 2 Cheryl A Schaefer		Case number (if know)	
4.1 4	Capital One	Last 4 digits of account number	2043	\$1,531.00
	Nonpriority Creditor's Name Attn: Gen. Corr./Bankruptcy Po Box 30285 Salt Lake City, UT 84130 Number Street City State Zlp Code	When was the debt incurred? As of the date you file, the claim is	Opened 11/13 Last Active 5/03/16	
	Who incurred the debt? Check one.	As of the date you me, the claim	S. Offeck all trial apply	
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	☐ Contingent ☐ Unliquidated ☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin	a plane, and other similar debts	
	■ No □ Yes	Other. Specify Credit Card		
4.1 5	Capital One	Last 4 digits of account number	1285	\$1,500.00
	Nonpriority Creditor's Name Attn: Gen. Corr./Bankruptcy Po Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Opened 11/13 Last Active 11/17/16	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	a plane, and other similar debts	
	■ No □ Yes	Other. Specify Credit Card		
4.1	Cardworks/CW Nexus Nonpriority Creditor's Name	Last 4 digits of account number	3939	\$686.00
	Attn: Bankruptcy Po Box 9201 Old Bethpage, NY 11804	When was the debt incurred?	Opened 08/15 Last Active 4/15/16	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	☐ Debts to pension or profit-sharin		
	Yes	Other. Specify Credit Card	<u> </u>	

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2 Cheryl A Schaefer	Case number (if know)	
Catholic Cemeteries		\$675.
Nonpriority Creditor's Name	Last 4 digits of account number	φ073
1400 S. Wolf Road	When was the debt incurred?	
Hillside, IL 60162-2105 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
☐ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only		
,	☐ Disputed Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt		
Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify	
Cda/Pontiac	Last 4 digits of account number 0198	\$259
Nonpriority Creditor's Name Attn:Bankruptcy	When was the debt incurred? Opened 11/16	
Po Box 213	Ороной 11/10	
Streator, IL 61364		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Collection Attorney Radiological Consultants Of Wo	
Central Dupage Emergency Phys	Last 4 digits of account number 2784	\$3,100
Nonpriority Creditor's Name P.O. Box 366 Hinsdale, IL 60522	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Medical	

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Debto Debto	r 1 John Schaefer r 2 Cheryl A Schaefer		Case number (if know)	
4.2 0	Citifinancial	Last 4 digits of account number	4695	\$0.00
	Nonpriority Creditor's Name	_		
	300 Saint Paul Pl Baltimore, MD 21202	When was the debt incurred?	Opened 8/14/07 Last Active 11/15/07	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Unsecured		
4.2	City of Chicago	Last 4 digits of account number		\$200.00
	Nonpriority Creditor's Name Department of Finance P.O. Box 88292	When was the debt incurred?		
	Chicago, IL 60680			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Cneck all that apply	
	Debtor 1 only	O continuent		
	Debtor 2 only	☐ Contingent		
	_	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	At least one of the debtors and another	Student loans	delann.	
	☐ Check if this claim is for a community debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	a plane, and other similar debts	
		<u> </u>	g plans, and other similar debts	
	☐ Yes	Other. Specify		
4.2	Comenity Bank/Catherines Nonpriority Creditor's Name	Last 4 digits of account number	4394	\$0.00
	Po Box 18215 Columbus, OH 43218	When was the debt incurred?	Opened 04/08 Last Active 04/10	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	_	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Charge Acc		

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Debtor Debtor	1 John Schaefer 2 Cheryl A Schaefer		Case number (if know)	
4.2	Comenity Bank/Lane Bryant	Last 4 digits of account number	6776	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 182125 Columbus, OH 43218	When was the debt incurred?	Opened 6/08/07 Last Active 10/14/07	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	□ Debtor 1 only ■ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	count	
4.2	Corporate America Fcu	Last 4 digits of account number	0142	\$828.00
	Nonpriority Creditor's Name Attn: Collections Dept 2075 Big Timber Rd Elgin, IL 60123	When was the debt incurred?	Opened 09/15 Last Active 2/24/17	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin		
	Yes	Other. Specify Check Cred	lit Or Line Of Credit	
4.2	Credit First National Assoc Nonpriority Creditor's Name	Last 4 digits of account number	9172	\$0.00
	Attn: BK Credit Operations Po Box 81315 Cleveland, OH 44181	When was the debt incurred?	Opened 4/30/11 Last Active 11/07/11	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	■ Other. Specify Charge Acc		

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Debto	or 2 Cheryl A Schaefer		Case number (if know)	
4.2	DSC Delbert	Last 4 digits of account number		\$2,312.00
0	Nonpriority Creditor's Name McCarran Center I, 7125 Pollock Dr,	When was the debt incurred?		· '
	Las Vegas, NV 89119 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify		
4.2	Fed Loan Sevicing Nonpriority Creditor's Name	Last 4 digits of account number	0009	\$0.00
	Po Box 69184 Harrisburg, PA 17106	When was the debt incurred?	Opened 1/09/12 Last Active 11/27/15	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify		
		Educationa	ıl	
4.2	Firestone	Last 4 digits of account number		\$777.00
	Nonpriority Creditor's Name P.O. Box 81344 Cleveland, OH 44188-0344	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Credit Card	<u> </u>	

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Debtor Debtor	1 John Schaefer 2 Cheryl A Schaefer		Case number (if know)	
4.2	Fst Premier	Last 4 digits of account number	4472	\$646.00
	Nonpriority Creditor's Name	_		
	601 S Minneapolis Ave Sioux Falls, SD 57104	When was the debt incurred?	Opened 05/16 Last Active 8/26/16	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit Card	I	
4.3	Great American Finance	Last 4 digits of account number	5893	\$2,050.00
	Nonpriority Creditor's Name	_	One and 40/45 Leaf Action	
	Attn: Bankruptcy 20 N Wacker Dr. Suite 2275 Chicago, IL 60606	When was the debt incurred?	Opened 12/15 Last Active 2/16/17	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Household	Goods	
4.3	Great Lake Roofing & Siding	Last 4 digits of account number		\$2,693.97
	Nonpriority Creditor's Name 738 W. Algonquin Rd. Arlington Heights, IL 60005	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		

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Debtor 1 Debtor 2	John Schaefer Cheryl A Schaefer		Case number (if know)	
4	Grove Dental Associates P C	Last 4 digits of account number	3682	\$136.00
 - 	Nonpriority Creditor's Name Baron Collection 155 Revere Dr Northbrook, IL 60062	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Cneck all that apply	
	Debtor 1 only	☐ Contingent		
_	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	☐ At least one of the debtors and another	Student loans	u Claim.	
c	☐ Check if this claim is for a community debt sthe claim subject to offset?		aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
_	□ Yes	Other. Specify Medical		
3	HCFS	Last 4 digits of account number	8015	\$675.00
;	Nonpriority Creditor's Name 3429 Regal Dr Alcoa. TN 37701	When was the debt incurred?		
1	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
I	Debtor 1 only	☐ Contingent		
I	Debtor 2 only	☐ Unliquidated		
I	Debtor 1 and Debtor 2 only	☐ Disputed		
I	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
I	☐ Check if this claim is for a community	☐ Student loans		
	debt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
ı	No	Debts to pension or profit-sharing	g plans, and other similar debts	
I	Yes	Other. Specify Medical		
	Heritage Elementary School Nonpriority Creditor's Name	Last 4 digits of account number		\$116.00
	507 Arnold Ave. Streamwood, IL 60107	When was the debt incurred?		
1	Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.			
_	Debtor 1 only	☐ Contingent		
_	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
_	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
C	☐ Check if this claim is for a community debt sthe claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
_	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify		

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Debtor Debtor	1 John Schaefer 2 Cheryl A Schaefer	Case number (if know)	
4.3 5	Hunt, Aranda & Subach	Last 4 digits of account number	\$2,703.00
	Nonpriority Creditor's Name 1035 S York R.	When was the debt incurred?	
	Bensenville, IL 60106	<u> </u>	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only		
	_ ,	☐ Contingent	
	Debtor 2 only	Unliquidated	
	■ Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.3	ICS	Last 4 digits of account number 0661	\$200.00
٢	Nonpriority Creditor's Name		
	P.O. Box 1010	When was the debt incurred?	
	Tinley Park, IL 60477-9110 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	The of the date year me, the stant let encourant that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	_	☐ Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Collection	
4.3	Illinois Tollways	Lock & distinct of account country	\$213.90
1	Nonpriority Creditor's Name	Last 4 digits of account number	Ψ= 10.00
	2700 Ogden Ave.	When was the debt incurred?	
	Downers Grove, IL 60515	-	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only		
		☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes		
	□ 162	Other. Specify Tolls	

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Debtor 2 Cheryl A Schaefer			Case number (if know)	
4.3	Joseph Mann & Creed	Last 4 digits of account number		\$1,695.00
	Nonpriority Creditor's Name 20600 Chagrin Blvd Ste. 550 Beachwood, OH 44122	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sep report as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify		
4.3	Kohls/Capital One	Last 4 digits of account number	8182	\$648.00
	Nonpriority Creditor's Name	_	Opened 44/42 Leet Active	
	Kohls Credit Po Box 3043	When was the debt incurred?	Opened 11/13 Last Active 8/08/14	
	Milwaukee, WI 53201	mon was and assembarrou.	0/00/14	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sep report as priority claims	aration agreement or divorce that you did not	
	No	☐ Debts to pension or profit-shari	ng plans, and other similar debts	
	Yes	Other. Specify Charge Ac	count	
4.4	Malcolm S Gerald & Associates, Inc.	Last 4 digits of account number	4096	\$100.00
	Nonpriority Creditor's Name 332 South Michigan Avenue Suite 600 Chianga III COCOA	When was the debt incurred?		
	Chicago, IL 60604 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sep report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	■ Other. Specify Collection	Account	

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Debtor Debtor	1 John Schaefer 2 Cheryl A Schaefer		Case number (if know)	
4.4 1	Merrick Bank	Last 4 digits of account number	3930	\$640.00
	Nonpriority Creditor's Name Po Box 660702 Dallas, TX 75266	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not	
	_	report as priority claims Debts to pension or profit-sharir	a plane, and other similar debte	
	■ No			
	Yes	Other. Specify Credit Card	1	
4.4	Midland Funding Nonpriority Creditor's Name	Last 4 digits of account number	2336	\$926.00
	Attn: Bankruptcy Po Box 939069	When was the debt incurred?	Opened 07/15	
	San Diego, CA 92193 Number Street City State Zlp Code	As of the data way file the plains	in Ohaali all that analis	
	Who incurred the debt? Check one.	As of the date you file, the claim	Is: Спеск ан that аррну	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Bank	Company Account Synchrony	
4.4	Midland Funding	Last 4 digits of account number	3947	\$876.00
	Nonpriority Creditor's Name Attn: Bankruptcy	When was the debt incurred?	Opened 07/15	
	Po Box 939069			
	San Diego, CA 92193			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	Пол		
	■ Debtor 2 only	☐ Contingent☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	■ Other. Specify Bank	Company Account Synchrony	

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2 Cheryl A Schaefer	Case number (if know)	
Midwest Emangers Associates		¢4 000 0
Midwest Emergency Associates Nonpriority Creditor's Name	Last 4 digits of account number	\$1,006.0
P.O. Box 6500	When was the debt incurred?	
Chicago, IL 60680		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
☐ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	\square Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical	
Northland Group	Local Auditation of account assessment	\$0.0
Nonpriority Creditor's Name	Last 4 digits of account number	Ψ0.0
7831 Glevroy Rd., Ste. 350 Edina, MN 55439	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	$oxedsymbol{\square}$ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
Northwestern Medicine		\$7,926.2
Nonpriority Creditor's Name	Last 4 digits of account number	φ1,920.2
28155 Network Place	When was the debt incurred?	
Chicago, IL 60673-1281		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	\square Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Medical	

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Debtor 2 Cheryl A Schaefer		Case number (if know)			
4.4	Pediatric Eye Associates	Last 4 digits of account number 5775	\$45.00		
	Nonpriority Creditor's Name 3612 Lake Ave, 2C Wilmette, IL 60091	When was the debt incurred?			
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	□ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	☐ Yes	Other. Specify Medical			
4.4	71.0		40.000.00		
8	PLS	Last 4 digits of account number	\$2,200.00		
	Nonpriority Creditor's Name 7300 N. Barrington Rd.	When was the debt incurred?			
	Hanover Park, IL 60133				
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims			
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify			
4.4	Premier Bankcard	Last 4 digits of account number	\$647.00		
9	Nonpriority Creditor's Name		• • • • • • • • • • • • • • • • • • • •		
	PO BOX 2208	When was the debt incurred?			
	Vacaville, CA 95696 Number Street City State Zlp Code	As of the date you file the claim in Observal, all that are be			
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	Debtor 1 only	Пол			
	Debtor 2 only	Contingent			
	<u> </u>	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community debt	Student loans			
	Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	Debts to pension or profit-sharing plans, and other similar debts			
	□ Yes				
	□ 162	■ Other. Specify Charge			

Debtor 1 John Schaefer

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Debto	or 2 Cheryl A Schaefer		Case number (if know)		
4.5	Radiological Consultants of Woodsto	Last 4 digits of account number		\$259.00	
	Nonpriority Creditor's Name 520 E 22nd Street Lombard, IL 60148	When was the debt incurred?	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt		aration agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims			
	No	Debts to pension or profit-sharin	g plans, and other similar debts		
	Yes	Other. Specify Medical			
4.5	Radiology Consultants of Woodstock	Last 4 digits of account number		\$37.00	
	Nonpriority Creditor's Name 9410 Compubill Dr. Orland Park, IL 60462	When was the debt incurred?			
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.				
	☐ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
	■ No	\square Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify			
4.5	Rise Credit	Last 4 digits of account number	6161	\$702.00	
	Nonpriority Creditor's Name			<u>.</u>	
	Customer Support Po Box 101808 Fort Worth, TX 76185	When was the debt incurred?	Opened 11/19/15 Last Active 10/07/16		
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.				
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify Unsecured			

Debtor 1 John Schaefer

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	1 John Schaefer 2 Cheryl A Schaefer	Case number (if know)	
4.5	Ronald Clemente DPM	Last 4 digits of account number	\$51.00
	Nonpriority Creditor's Name 1015 Wise Rd. Ste. 101 Schaumburg, IL 60193	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.5	South Elgin High School	Last 4 digits of account number	\$240.00
	Nonpriority Creditor's Name 760 E. Main St. South	When was the debt incurred?	
	Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.5 5	Spot loan	Last 4 digits of account number	\$1,012.00
	Nonpriority Creditor's Name		
	P.O. Box 927 Palatine, IL 60078	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Teport as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
	■ No □ Yes	_	
	Li res	Other. Specify	

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Debto	or 2 Cheryl A Schaefer		Case number (if know)		
4.5 6	St. Alexius Medical Center	Last 4 digits of account number	4096	\$8,027.00	
	Nonpriority Creditor's Name 3040 W Salt Creek Ln,	When was the debt incurred?			
	Arlington Heights, IL 60005 Number Street City State Zlp Code	As of the date you file, the claim	is: Chack all that apply		
	Who incurred the debt? Check one.	As of the date you me, the claim	B. Check all that apply		
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	`			
	<u> </u>	☐ Disputed Type of NONPRIORITY unsecure	d claim:		
	☐ At least one of the debtors and another	Student loans	d Claim.		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	aration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify Medical			
4.5	St. John the Evangelist	Last 4 digits of account number		\$132.00	
1	Nonpriority Creditor's Name				
	502 S. Park Blvd.	When was the debt incurred?			
	Streamwood, IL 60107 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.	As of the date you me, the olding	S. Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
		Type of NONPRIORITY unsecure	d claim:		
	☐ At least one of the debtors and another	☐ Student loans			
	☐ Check if this claim is for a community debt		aration agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify			
4.5	Syncb/Sams Club	Last 4 digits of account number	1490	\$0.00	
	Nonpriority Creditor's Name	_			
	Po Box 965064 Orlando, FL 32896	When was the debt incurred?	Opened 01/86 Last Active 8/14/03		
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.	-			
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	\square Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
	No	Debts to pension or profit-sharir	on plans, and other similar debts		
	☐ Yes	Other. Specify Charge Acc	count		

Debtor 1 John Schaefer

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Debtor Debtor	1 John Schaefer 2 Cheryl A Schaefer		Case number (if know)	
4.5 9	Synchrony Bank/Amazon	Last 4 digits of account number	0409	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 956060 Orlando, FL 32896	When was the debt incurred?	Opened 11/27/13 Last Active 1/30/14	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	□ Debtor 1 only ■ Debtor 2 only □ Debtor 1 and Debtor 2 only	☐ Contingent ☐ Unliquidated ☐ Disputed	d aloim.	
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify Charge Acc		
4.6 0	Synchrony Bank/Disney	Last 4 digits of account number	5267	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 956060 Orlando, FL 32896	When was the debt incurred?	Opened 09/99 Last Active 9/05/02	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separeport as priority claims	d claim: eration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	count	
4.6	Synchrony Bank/Walmart Nonpriority Creditor's Name	Last 4 digits of account number	1098	\$0.00
	Attn: Bankruptcy Po Box 956060 Orlando, FL 32896	When was the debt incurred?	Opened 12/08/13 Last Active 1/30/14	
	Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only	As of the date you file, the claim i	is: Check all that apply	
	_	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed	d alaim.	
	At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	u Ciaiiii.	
	☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Charge Acc	count	

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Debtor 2 Cheryl A Schaefer			Case number (if know)			
4.6	Target	Last 4 digits of account number	4817	\$25.00		
	Nonpriority Creditor's Name C/O Financial & Retail Srvs Mailstopn BT POB 9475 Minneapolis, MN 55440	When was the debt incurred?	Opened 12/93 Last Active 7/22/05			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	rration agreement or divorce that you did not			
	No	Debts to pension or profit-sharing	g plans, and other similar debts			
	☐ Yes	Other. Specify Credit Card	<u> </u>			
4.6	Us Dept Ed	Last 4 digits of account number	5257	\$77,160.00		
	Nonpriority Creditor's Name Ecmc/Bankruptcy Po Box 16408	When was the debt incurred?	Opened 01/10			
	St Paul, MN 55116 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.					
	☐ Debtor 1 only	☐ Contingent				
	■ Debtor 2 only	Unliquidated				
	Debtor 1 and Debtor 2 only	Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	 Student loans Obligations arising out of a separeport as priority claims 	aration agreement or divorce that you did not			
	No	Debts to pension or profit-sharing	g plans, and other similar debts			
	□ Yes	☐ Other. Specify				
	55	Educationa	ıl			
4.6						
4.0	US Dept of Education	Last 4 digits of account number	<u>4911</u>	\$0.00		
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 16448 Saint Paul, MN 55116	When was the debt incurred?	Opened 9/03/12 Last Active 11/13/12			
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.					
	☐ Debtor 1 only	☐ Contingent				
	■ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	Disputed	L. Later			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	a ciaim:			
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	☐ Yes	Other. Specify				
		Educations	1			

Debtor 1 John Schaefer

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Debto	Cheryl A Schaefer	Case number (if know)			
4.6	Village of Fox River Grove	Last 4 digits of account number	0918	\$100.00	
	Nonpriority Creditor's Name Photo Enforcement Program 75 Remittance Dr.; Ste 6658 Chicago, IL 60675	When was the debt incurred?			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	☐ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
	No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify Tickets			
4.6	Village of Steamwood Water	Last 4 digits of account number		\$400.00	
	Nonpriority Creditor's Name 301 E. Irving Park Rd. Streamwood, IL 60107	When was the debt incurred?			
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims			
	■ No	Debts to pension or profit-sharing			
	Yes	Other. Specify			
4.6					
7	Wells Fargo Dealer Services	Last 4 digits of account number	0290	\$0.00	
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 19657	When was the debt incurred?	Opened 06/06 Last Active 4/20/07		
	Irvine, CA 92623 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.	,	and apply		
	☐ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
	No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify Automobile)		

Debtor 1 John Schaefer

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Debtor Debtor	1 John Schaefer Cheryl A Schaefer		Case number (if know)	
4.6	West Suburban Bank	Last 4 digits of account number		\$500.00
	Nonpriority Creditor's Name 711 South Meyers Road Lombard, IL 60148	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
4.6	Winfield Laboratory Consulatants Nonpriority Creditor's Name	Last 4 digits of account number	0796	\$91.00
	Dept 4408 Carol Stream, IL 60122	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d alaim.	
	At least one of the debtors and another	Student loans	d Claim.	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Medical		
4.7 0	World Finance Corporat	Last 4 digits of account number	0901	\$1,095.00
	Nonpriority Creditor's Name 108 Frederick St Greenville, SC 29607	When was the debt incurred?	Opened 03/16 Last Active 1/25/17	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	\square Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	\square Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Secured		

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 John Schaefer Debtor 2 Cheryl A Schaefer Case number (if know) On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Accounts Receivable Management Line 4.62 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Inc. Part 2: Creditors with Nonpriority Unsecured Claims P.O. Box 129 Thorofare, NJ 08086 Last 4 digits of account number 3578 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Arnold Scott Harris Line 4.37 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 111 W. Jackson Blvd Part 2: Creditors with Nonpriority Unsecured Claims Suite 600 Chicago, IL 60604 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **ARS** Line 4.44 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 459079 Part 2: Creditors with Nonpriority Unsecured Claims Fort Lauderdale, FL 33345 Last 4 digits of account number 2260 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Blitt & Gaines PC** Line 4.14 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 661 Glenn Ave ■ Part 2: Creditors with Nonpriority Unsecured Claims Wheeling, IL 60090 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Blitt & Gaines PC Line **4.15** of (*Check one*): ☐ Part 1: Creditors with Priority Unsecured Claims 661 Glenn Ave ■ Part 2: Creditors with Nonpriority Unsecured Claims Wheeling, IL 60090 Last 4 digits of account number 1965 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Blitt & Gaines PC** Line 4.42 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 661 Glenn Ave ■ Part 2: Creditors with Nonpriority Unsecured Claims Wheeling, IL 60090 Last 4 digits of account number 0733 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Blitt & Gaines PC** Line 4.43 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 661 Glenn Ave Part 2: Creditors with Nonpriority Unsecured Claims Wheeling, IL 60090 Last 4 digits of account number 0734 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **CBCS** Line 4.28 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 2589 Part 2: Creditors with Nonpriority Unsecured Claims Columbus, OH 43216 Last 4 digits of account number 8289 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Creditors Discount & Audit** Line **4.50** of (*Check one*): ☐ Part 1: Creditors with Priority Unsecured Claims Company ■ Part 2: Creditors with Nonpriority Unsecured Claims 415 East Main Street P.O. Box 213 Streator, IL 61364-0213 Last 4 digits of account number 1889 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? HRRG Line 4.44 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 8486 ■ Part 2: Creditors with Nonpriority Unsecured Claims Pompano Beach, FL 33075 Last 4 digits of account number 4400 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? MiraMed Revenue Group Line 4.56 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

Official Form 106 E/F

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Debtor 1 John Schaefer Debtor 2 Cheryl A Schaefer	Document 1 ag	Case number (if know)
Dept. 77304 PO Box 77000 Detroit, MI 48277-0304		Part 2: Creditors with Nonpriority Unsecured Claims
2011 01.1, III. 1021 1 000 1	Last 4 digits of account number	5419
Name and Address	On which entry in Part 1 or Part 2 d	,
MiraMed Revenue Group	Line 4.56 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims
360 E 22nd St Lombard, IL 60148-6408		Part 2: Creditors with Nonpriority Unsecured Claims
20113414, 12 00140 0400	Last 4 digits of account number	4808
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?
Nationwide Credit & Collection, Inc	Line 4.46 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
815 Commerce Drive Suite 270		■ Part 2: Creditors with Nonpriority Unsecured Claims
Oak Brook, IL 60523	Last 4 digits of account number	6865
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?
Nationwide Credit & Collection, Inc	Line 4.19 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
815 Commerce Drive Suite 100		Part 2: Creditors with Nonpriority Unsecured Claims
Oak Brook, IL 60523	Last 4 digits of account number	0796
Name and Address	On which entry in Part 1 or Part 2 d	,
Nationwide Credit & Collection, Inc	Line 4.12 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
815 Commerce Drive Suite 100		Part 2: Creditors with Nonpriority Unsecured Claims
Oak Brook, IL 60523		
,	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?
Rushmore Service Center	Line 4.49 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
P.O. Box 5508 Sioux Falls, SD 57117		■ Part 2: Creditors with Nonpriority Unsecured Claims
Sidux Falls, 3D 37 117	Last 4 digits of account number	7455
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?
U.S. Attorney's Office	Line 2.1 of (Check one):	■ Part 1: Creditors with Priority Unsecured Claims
219 S. Dearborn Chicago, IL 60602		☐ Part 2: Creditors with Nonpriority Unsecured Claims
51110ag5, 12 55552	Last 4 digits of account number	
Part 4: Add the Amounts for Each Type of	of Unsecured Claim	
		tical reporting purposes only. 28 U.S.C. §159. Add the amounts for each
type of unsecured claim.		

				Total Claim
Total	6a.	Domestic support obligations	6a.	\$ 0.00
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 27,000.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 27,000.00
				Total Claim
	6f.	Student loans	6f.	\$ 77,160.00
Total claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that		2.22
	- 3	you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 58,372.20

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Debtor 1 John Schaefer

Debtor 2 Cheryl A Schaefer Case number (if know)

6j. Total Nonpriority. Add lines 6f through 6i.

6j. \$ **135,532.20**

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		1700.000	111 FAUE 40 ULOS	
Fill in this infor	mation to identify your	case:		
Debtor 1	John Schaefer			
	First Name	Middle Name	Last Name	
Debtor 2	Cheryl A Schaefe	er		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the r, Street, City, State and ZIP	e contract or lease Code	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3	Oity		Olaic	Zii Oodc	
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4	<u> </u>		Oldio	2 0000	
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_

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dentify your ca Schaefer A Schaefer	Middle Name			
9	Middle Name			
9	Middle Name			
A Schaefer	Wildale Harrie	Last Name		
•	Middle Name	Last Name		
ourt for the:	NORTHERN DISTRIC	T OF ILLINOIS		
				Check if this is an
				amended filing
SI I				
ur Code	btors			12/15
er (if known). A	Answer every question	on.		
				d territories include
, former spous	e, or legal equivalent li	ve with you at the time?		
debtor only if t E/F (Official F	hat person is a guara	intor or cosigner. Make s	ure you have listed the creditor	on Schedule D (Official E/F, or Schedule G to fill
City, State and ZIP	Code		Check all schedules that appl	_
			☐ Schedule D. line	
			- ' 	
oot			_	
001	State	ZIP Code		
			□ Cabadula D. lina	
			-	
eeı	State	ZIP Code		
nker or	ohr Code Intities who are both are equal entries in the both (if known). If Indicate the code that is the code to the code t	Middle Name NORTHERN DISTRICE OUR Codebtors Intities who are also liable for any deboth are equally responsible for supertries in the boxes on the left. Attainer (if known). Answer every question odebtors? (If you are filling a joint case ars, have you lived in a community pho, Louisiana, Nevada, New Mexico, File, former spouse, or legal equivalent lift your codebtors. Do not include you debtor only if that person is a guarate E/F (Official Form 106E/F), or Scheme codebtor Codebtor City, State and ZIP Code	NORTHERN DISTRICT OF ILLINOIS OUR Codebtors Intities who are also liable for any debts you may have. Be as both are equally responsible for supplying correct information of the common of the commo	Middle Name Last Name Fourt for the: MORTHERN DISTRICT OF ILLINOIS Column Codebtors

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Fill	in this information to	o identify your ca	ase:			ı		
Del	otor 1	John Schae	fer					
1	otor 2 ouse, if filing)	Cheryl A Sc	haefer					
Uni	ted States Bankrupt	cy Court for the	: NORTHERN DISTRIC	T OF IL	LINOIS			
	se number						ck if this is: An amended filing A supplement showing postpetition chap I3 income as of the following date:	oter
0	fficial Form	<u> 1061</u>				Ī	MM / DD/ YYYY	
S	chedule I: \	Your Inc	ome					12/15
atta	ch a separate shee	et to this form.		onal pag	ges, write your name an		t your spouse. If more space is need umber (if known). Answer every ques	
	information.			Debto			Debtor 2 or non-filing spouse	
	If you have more t attach a separate information about	page with	Employment status*		iployed t employed		■ Employed□ Not employed	
	employers.	additional	Occupation	Proje	ct Coordinator		Customer Svc Supervisor	
	Include part-time, self-employed wor		Employer's name	Olym	pic Store Fixtures		Gerber National Claims Svcs	
	Occupation may ir or homemaker, if i		Employer's address		S. Cicero Ave ago, IL 60638		150 Center Court Schaumburg, IL 60195	
			How long employed the	here?	4 years *See Attachment for	Additio	9 years nal Employment Information	
Pai	rt 2: Give Det	ails About Mor	nthly Income					
	mate monthly inco		ate you file this form. If	you have	nothing to report for any	line, write	e \$0 in the space. Include your non-filing	g
,	ou or your non-filing se e space, attach a se	•	. , ,	mbine th	ne information for all emp	oyers for	that person on the lines below. If you n	eed

				For Deptor 1		iling spouse
2.	List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	\$_	3,750.02	\$	3,862.52
3.	Estimate and list monthly overtime pay.	3.	+\$_	0.00	+\$	0.00
4.	Calculate gross Income. Add line 2 + line 3.	4.	\$_	3,750.02	\$_	3,862.52

Official Form 106I Schedule I: Your Income page 1

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	otor 1 otor 2	John Schaefer Cheryl A Schaefer	-	С	ase ı	number (<i>if known</i>)			
						Debtor 1		ebtor 2 or iling spouse	
	Cop	by line 4 here	4.		\$	3,750.02	\$	3,862.52	-
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.		\$	653.94	\$	684.28	
	5b.	Mandatory contributions for retirement plans	5b.		\$	0.00	\$	0.00	-
	5c.	Voluntary contributions for retirement plans	5c.		\$	0.00	\$	0.00	_
	5d.	Required repayments of retirement fund loans	5d.		\$	0.00	\$	0.00	-
	5e.	Insurance	5e.		\$	0.00	\$	1,125.09	-
	5f.	Domestic support obligations	5f.		\$	0.00	\$	0.00	_
	5g.	Union dues	5g.		\$	0.00	\$	0.00	_
	5h.	Other deductions. Specify:	5h.	.+	\$	0.00	+ \$	0.00	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	;	\$	653.94	\$	1,809.37	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	,	\$	3,096.08	\$	2,053.15	_
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.		\$	0.00	\$	0.00	
	8b.	Interest and dividends	8b.		\$ 	0.00	\$	0.00	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.			\$	0.00	\$ \$	0.00	=
	8d.	Unemployment compensation	8d.		\$ 	0.00	\$	0.00	_
	8e.	Social Security	8e.		\$ —	0.00	\$	0.00	_
	8f. 8g. 8h.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income Other monthly income. Specify: State of Illinois	e 8f. 8g. 8h.		\$ \$	0.00	\$ \$ + \$	0.00 0.00 953.48	-
9.	Δda	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	— 9.	\$		0.00	\$	953.4	<u>-</u>
٥.	Auc	Tall Caller Internet. And lines our oproprior for rogress.	٥.	L	_	0.00		333.7	
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_		3,096.08 + \$_	3,00	96.63	6,102.71
11.	Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	depe		,	,	•	hedule J. 11. +\$	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The respect that amount on the Summary of Schedules and Statistical Summary of Certailies						12. \$	6,102.71
13.	. Do	you expect an increase or decrease within the year after you file this form No.	?					Combine monthle	ned y income
	_	Yes Explain:							

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Debtor 1	John Schaefer		
	Cheryl A Schaefer	Case number (if known)	

Official Form B 6I Attachment for Additional Employment Information

Spouse		
Occupation	Personal Assistant for son	
Name of Employer	State of Illinois	
How long employed		
Address of Employer		

Official Form 106I Schedule I: Your Income page 3

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Fill	in this informa	ition to identify yo	our case:			I				
Deb						Ch	nack	if this is:		
Deb	NOI I	John Schaef	er					n amended filing		
	otor 2	Cheryl A Sch	naefer						ving postpetition chapter the following date:	ſ
(Spc	ouse, if filing)							·	the following date.	
Unit	ed States Bankı	ruptcy Court for the	: NORTH	IERN DISTRICT OF ILLIN	OIS		M	M / DD / YYYY		
	e number nown)									
Of	fficial Fo	rm 106J								
So	chedule	J: Your	Exper	ises					12	/1
Be a	as complete ormation. If m	and accurate as	possible.	If two married people ar ch another sheet to this						
Par		ribe Your House	hold							
1.	Is this a joir									
		es Debtor 2 live i	in a separ	ate household?						
	■ N		·							
			st file Offici	al Form 106J-2, <i>Expenses</i>	s for Separate House	ehold of D	ebtor	2.		
2.	Do you have	e dependents?	□ No							
	Do not list D Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relati			Dependent's age	Does dependent live with you?	
	Do not state dependents				Daughter			10	□ No ■ Yes	
					Son			15	□ No	
					3011				■ Yes □ No	
									☐ Yes	
									□ No	
3.	Do your exp	oenses include		No					☐ Yes	
	expenses o	f people other the	han □	Yes						
		d your depende								
exp	imate your ex		our bankrı	y Expenses uptcy filing date unless y y is filed. If this is a supp						
the		h assistance an		government assistance i luded it on <i>Schedule I:</i> \				Your exp	enses	
,		,								
4.		or home owners and any rent for the		ses for your residence. I r lot.	nclude first mortgage	e 4.	\$		1,247.00	
	If not includ	led in line 4:								
	4a. Real e	estate taxes				4a.	\$		0.00	
	•	rty, homeowner's				4b.			0.00	
		maintenance, re owner's associat		ıpkeep expenses dominium dues		4c. 4d.			120.00 0.00	
5.				our residence, such as ho	me equity loans		\$		0.00	

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	Schaefer /I A Schaefer	Case num	ber (if known)	
Utilities:				
6a. Electri	city, heat, natural gas	6a.	\$	300.00
6b. Water	sewer, garbage collection	6b.	\$	150.00
6c. Telepl	none, cell phone, Internet, satellite, and cable services	6c.	\$	500.00
6d. Other.	Specify:	6d.	\$	0.00
	pusekeeping supplies		\$	800.00
	nd children's education costs	8.	\$	150.00
	undry, and dry cleaning	9.	\$	250.00
•	re products and services	10.	\$	75.00
	dental expenses	11.	\$	250.00
	ion. Include gas, maintenance, bus or train fare.			
	le car payments.	12.	\$	600.00
	ent, clubs, recreation, newspapers, magazines, and books	13.	\$	120.00
	ontributions and religious donations	14.	\$	0.00
. Insurance.	•			
	le insurance deducted from your pay or included in lines 4 or 20.			
15a. Life in	, , ,	15a.	\$	0.00
15b. Health	insurance	15b.	\$	0.00
15c. Vehicl	e insurance	15c.	\$	170.00
15d. Other	insurance. Specify:	15d.	\$	0.00
6. Taxes. Do n	ot include taxes deducted from your pay or included in lines 4 or 20.			
Specify:	, , , , , , , , , , , , , , , , , , ,	16.	\$	0.00
. Installment	or lease payments:			
17a. Car pa	lyments for Vehicle 1	17a.	\$	0.00
17b. Car pa	lyments for Vehicle 2	17b.	\$	0.00
17c. Other.	Specify:	17c.	\$	0.00
17d. Other.		17d.	\$	0.00
	nts of alimony, maintenance, and support that you did not report a		•	
	om your pay on line 5, Schedule I, Your Income (Official Form 106I).		\$	0.00
	ents you make to support others who do not live with you.		\$	0.00
Specify:		19.	-	
). Other real p	roperty expenses not included in lines 4 or 5 of this form or on Sch	nedule I: Yo	our Income.	
20a. Mortga	ages on other property	20a.	\$	0.00
20b. Real e	state taxes	20b.	\$	0.00
20c. Prope	rty, homeowner's, or renter's insurance	20c.	\$	0.00
20d. Mainte	enance, repair, and upkeep expenses	20d.	\$	0.00
	owner's association or condominium dues	20e.	\$	0.00
. Other: Spec		21.	·	0.00
. Cinon opeo			- Ψ	0.00
2. Calculate yo	our monthly expenses			
	es 4 through 21.		\$	4,732.00
22b. Copy lir	ne 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	22a and 22b. The result is your monthly expenses.		\$	4,732.00
	, , ,			-,
•	our monthly net income.		_	
	ine 12 (your combined monthly income) from Schedule I.	23a.		6,102.71
23b. Copy	our monthly expenses from line 22c above.	23b.	-\$	4,732.00
				<u> </u>
	ct your monthly expenses from your monthly income.	00-	 	1,370.71
The re	sult is your monthly net income.	23c.	\$	1,370.71
For example, of modification to	ect an increase or decrease in your expenses within the year after you on expect to finish paying for your car loan within the year or do you expect you the terms of your mortgage?			or decrease because o
■ No.				
☐ Yes.	Explain here: Household repairs - home is over 50 years of	old and m	any things nee	d replacing and r

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Fill in this in	formation to identify your	case:	
Debtor 1	John Schaefer		
	First Name	Middle Name Last Na	ame
Debtor 2	Cheryl A Schaefe		
(Spouse if, filing)	First Name	Middle Name Last Na	ame
United States	s Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS	
Case numbe	r		
(if known)			☐ Check if this is an
			amended filing
Official F	own 100Doo		
	orm 106Dec		
Declar	ation About a	ın Individual Debtoı	r's Schedules 12/15
If two marrie	d people are filing togethe	, both are equally responsible for sup	oplying correct information.
You must file	this form whenever you f	le bankruptcy schedules or amended	schedules. Making a false statement, concealing property, or
			can result in fines up to \$250,000, or imprisonment for up to 20
years, or bot	h. 18 U.S.C. §§ 152, 1341, 1	519, and 3571.	
;	Sign Below		
Did you	ı pay or agree to pay some	one who is NOT an attorney to help yo	ou fill out bankruptcy forms?
■ No			
■ No)		
☐ Ye	s. Name of person		Attach Bankruptcy Petition Preparer's Notice,
			Declaration, and Signature (Official Form 119)
	enalty of perjury, I declare y are true and correct.	that I have read the summary and sch	nedules filed with this declaration and
_		V (.	a/Ohamid A Oakaastan
	John Schaefer nn Schaefer		s/ Cheryl A Schaefer Cheryl A Schaefer
	nature of Debtor 1		Signature of Debtor 2
<i>y</i> .g		_	
Date	March 15, 2017	D	Date March 15, 2017

Fill	in this inforn	nation to identify you	r case:			
Deb	tor 1	John Schaefer				
D-1-	40	First Name	Middle Name	Last Name		
	tor 2 use if, filing)	Cheryl A Schaef First Name	Middle Name	Last Name		
Linit	ad States Bar	akruptov Court for the	NORTHERN DISTRICT	OF ILLINOIS		
Unit	eu States Da	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
l	e number _					
(if kno	own)				_	theck if this is an mended filing
						menaca ming
~ ·		407				
	icial Fo					
Sta	atement	of Financial	Affairs for Indivi	duals Filing for E	Bankruptcy	4/16
					equally responsible for sup	
		ore space is needed, n). Answer every que		this form. On the top of an	y additional pages, write you	ir name and case
	<u> </u>	,				
Par	Give D	etails About Your Ma	arital Status and Where You	I Lived Before		
1.	What is you	current marital statu	ıs?			
	Morriad					
	MarriedNot mar	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No					
	☐ Yes. Lis	t all of the places you l	ived in the last 3 years. Do n	ot include where you live nov	V.	
	Debtor 1 Pr	ior Address:	Dates Debtor 1	Debtor 2 Prior Ad	idraee:	Dates Debtor 2
	Debtor 111	ioi Audiess.	lived there	Debiol 21 Hol At	Juless.	lived there
3.	Within the la	ıst 8 vears, did vou ev	ver live with a spouse or le	gal equivalent in a commun	nity property state or territory	1? (Community property
					ico, Texas, Washington and W	
	■ Na					
	■ No □ Yes. Ma	ike sure vou fill out Sch	hedule H: Your Codebtors (O	ifficial Form 106H)		
		ine sure you iiii out ooi	icadic 11. Tour Codebiors (C	molari omi roorij.		
Par	Explai	n the Sources of You	r Income			
4	Did you hav	a any inaoma from an	nnlovment er frem eneratir	as a business during this v	ear or the two previous caler	ador vooro?
				all businesses, including part		iuai years?
	If you are filir	ig a joint case and you	have income that you receiv	re together, list it only once u	nder Debtor 1.	
	□ No					
	Yes. Fill	in the details.				
			5.17		D.1.	
			Debtor 1	Grace income	Debtor 2	Grass income
			Sources of income Check all that apply.	Gross income (before deductions and	Sources of income Check all that apply.	Gross income (before deductions
				exclusions)		and exclusions)
		of current year until	■ Wages, commissions,	\$7,788.51	■ Wages, commissions,	\$9,003.50
the	date you file	d for bankruptcy:	bonuses, tips	· •	bonuses, tips	• •
			☐ Operating a business		☐ Operating a business	
			, 3		, 3	

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John Schaefer Debtor 1 Cheryl A Schaefer Debtor 2 Case number (if known) Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$0.00 \$0.00 Wages, commissions, Wages, commissions, (January 1 to December 31, 2016) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business \$0.00 \$0.00 For the calendar year before that: Wages, commissions. Wages, commissions. (January 1 to December 31, 2015) bonuses, tips bonuses, tips ☐ Operating a business Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income from** Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? □ No. Go to line 7. □ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? □ No. Go to line 7. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. **Creditor's Name and Address Dates of payment Total amount** Amount you Was this payment for ... paid still owe Americash Loans \$900.00 \$0.00 ☐ Mortgage 848 N. Rt 59 ☐ Car Aurora, IL 60504 ☐ Credit Card Loan Repayment ☐ Suppliers or vendors

□ Other

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Debtor	2 Cheryl A Schaefer		Cas	se number (if knov	vn)	
<i>Ins</i> of v a b	thin 1 year before you filed for bankruptoriders include your relatives; any general payhich you are an officer, director, person in usiness you operate as a sole proprietor. 1 mony.	ortners; relatives of any ger control, or owner of 20% of	neral partners; partners partners or more of their votin	erships of which g securities; and	you are a general any managing a	al partner; corporations agent, including one for
	No					
	Yes. List all payments to an insider.					
Ins	sider's Name and Address	Dates of payment	Total amount paid	Amount you still owe		this payment
ins	thin 1 year before you filed for bankruptoider? Ide payments on debts guaranteed or cos		ments or transfer a	any property on	account of a d	ebt that benefited an
	No					
	Yes. List all payments to an insider					
Ins	sider's Name and Address	Dates of payment	Total amount paid	Amount you still owe		this payment litor's name
Part 4:	Identify Legal Actions, Repossession	ns, and Foreclosures				
List	thin 1 year before you filed for bankrupto tall such matters, including personal injury difications, and contract disputes.					
	No					
	Yes. Fill in the details.					
	ase title ase number	Nature of the case	Court or agency		Status of th	ne case
Sc	apital One Bank v. Cheryl chaefer s M3 002712	Collections	Circuit Court o County, 3rd Di 165015 S. Ked: Markham, IL 66	v zie Pkway	☐ Pending☐ On appe☐ Conclud	eal
					Garnishm	ent
	thin 1 year before you filed for bankrupto eck all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.		erty repossessed, 1	foreclosed, garı	nished, attached	d, seized, or levied?
Cr	editor Name and Address	Describe the Property		Da	te	Value of the
		Explain what happened	d			property
acc	thin 90 days before you filed for bankrup counts or refuse to make a payment becan No		luding a bank or fi	nancial instituti	on, set off any a	amounts from your
	Yes. Fill in the details.			_		
Cr	editor Name and Address	Describe the action the	e creditor took	Da tak	te action was en	Amount
	thin 1 year before you filed for bankruptourt-appointed receiver, a custodian, or a		erty in the possess	ion of an assig	nee for the bene	efit of creditors, a
	No					
	Yes					

John Schaefer

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	btor 1 John Schaefer btor 2 Cheryl A Schaefer	Case number	(if known)	
Dai	rt 5: List Certain Gifts and Contributions			
		, did you give any gifts with a total value of more t	than \$600 per person?	,
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:			
4.	Within 2 years before you filed for bankruptcy. ■ No □ Yes. Fill in the details for each gift or contribute.	, did you give any gifts or contributions with a tota	al value of more than	\$600 to any charity?
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value
Pai	rt 6: List Certain Losses			
5.	Within 1 year before you filed for bankruptcy or gambling?	or since you filed for bankruptcy, did you lose any	thing because of thef	t, fire, other disaster
	■ No □ Yes. Fill in the details.			
	how the loss occurred Include	cribe any insurance coverage for the loss de the amount that insurance has paid. List pending ance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Pai	rt 7: List Certain Payments or Transfers			
6.	consulted about seeking bankruptcy or prepare	did you or anyone else acting on your behalf pay ring a bankruptcy petition? ers, or credit counseling agencies for services require		ty to anyone you
	□ No■ Yes. Fill in the details.			
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Zalutsky & Pinski, Ltd 111 W. Washington, ste 1550 Chicago, IL 60602	\$600 (\$3190 to filing fee, \$53 to joint credit report, \$15 to credit counseling, and \$222 to attorney fees)	Feb. 2017	\$600.00
7.	Within 1 year before you filed for bankruptcy, promised to help you deal with your creditors Do not include any payment or transfer that you li		or transfer any propei	ty to anyone who
	■ No □ Yes. Fill in the details.			
	Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment

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John Schaefer Cheryl A Schaefer Debtor 2

Case number (if known)

18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details.					
	Person Who Received Transfer Address Person's relationship to you	Description and v property transfer		Describe any property of payments received or dipaid in exchange		insfer was
19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details.					
	Name of trust	Description and v	alue of the prope	erty transferred	Date Tra	ansfer was
Par	t 8: List of Certain Financial Accounts, Ins	truments, Safe Deposit	Boxes, and Stor	age Units		
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, association No	r other financial accou	nts; certificates o	•	•	
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accoun instrument	t or Date account wa closed, sold, moved, or transferred		ast balance closing or transfer
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No					ecurities,
	Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe the contents	Do yo	ou still it?
22.	Have you stored property in a storage unit o No Yes. Fill in the details.	ĺ	home within 1 ye	ear before you filed for ba	nkruptcy?	
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		Describe the contents	Do yo have	ou still it?
Par	t 9: Identify Property You Hold or Control	for Someone Else				
23.	Do you hold or control any property that sor for someone. No Yes. Fill in the details.	neone else owns? Inclu	ude any property	you borrowed from, are s	toring for, or hole	d in trust
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe the property		Value
	t 10: Give Details About Environmental Info					

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

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toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or

regulations controlling the cleanup of these substances, wastes, or material.

Debtor 1 John Schaefer
Debtor 2 Cheryl A Schaefer

Case number (if known)

Hazardous material means anything an environmental law defines as a har hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless 24. Has any governmental unit notified you that you may be liable or potential No	s of when they occurred.	e,				
24. Has any governmental unit notified you that you may be liable or potential No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Code) Code Covernmental unit Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, ZIP Code) No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No No	·					
No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) 25. Have you notified any governmental unit of any release of hazardous mate No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code) Have you been a party in any judicial or administrative proceeding under a No	ally liable under or in violation of an environmental law					
□ Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) 25. Have you notified any governmental unit of any release of hazardous mate ■ No □ Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, ZIP Code) Code)		?				
Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, ZIP Code) Address (Number, Street, City, ZIP Code) No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, ZIP Code) Address (Number, Street, City, State and ZIP Code)						
No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, ZIP Code) Code) Governmental unit Address (Number, Street, City, ZIP Code) No		f notice				
☐ Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under a No	terial?					
Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, ZIP Code) Address (Number, Street, City, ZIP Code) Address (Number, Street, City, ZIP Code) No						
■ No		f notice				
	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.					
Case Title Court or agency Name Address (Number, Street, City State and ZIP Code)	Nature of the case Status case	of the				
Part 11: Give Details About Your Business or Connections to Any Business	S					
27. Within 4 years before you filed for bankruptcy, did you own a business or	r have any of the following connections to any busines	ss?				
$\hfill \square$ A sole proprietor or self-employed in a trade, profession, or other	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time					
☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)						
☐ A partner in a partnership						
☐ An officer, director, or managing executive of a corporation						
☐ An owner of at least 5% of the voting or equity securities of a corporation						
No. None of the above applies. Go to Part 12.						
Yes. Check all that apply above and fill in the details below for each business.						
Business Name Address (Number, Street, City, State and ZIP Code) Describe the nature of the bu	Do not include Social Security number of	or ITIN.				
(Number, Street, City, State and ZIP Code) Name of accountant or booking	Dates business existed					
28. Within 2 years before you filed for bankruptcy, did you give a financial sta institutions, creditors, or other parties.	atement to anyone about your business? Include all fin	nancial				
■ No						
☐ Yes. Fill in the details below.						
Name Address (Number, Street, City, State and ZIP Code)						

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Debtor 1	John Schaefer		
Debtor 2	Cheryl A Schaefer		Case number (if known)
Part 12:	Sign Below		
I have rea	ad the answers on this Statement of	Financial Affairs a	and any attachments, and I declare under penalty of perjury that the answer
are true a	and correct. I understand that makin	g a false statement	t, concealing property, or obtaining money or property by fraud in connecti
	inkruptcy case can result in fines up . §§ 152, 1341, 1519, and 3571.	to \$250,000, or imp	prisonment for up to 20 years, or both.
10 0.3.0	. 99 152, 1541, 1519, and 5571.		
/s/ Johi	n Schaefer	/s/ Ch	heryl A Schaefer
John S	chaefer	Chery	yl A Schaefer
Signatu	re of Debtor 1	Signat	ature of Debtor 2
Date N	March 15, 2017	Date	March 15, 2017
Did you a	attach additional pages to Your State	ement of Financial	Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
■ No			
☐ Yes			
Did you p	pay or agree to pay someone who is	not an attorney to	help you fill out bankruptcy forms?
■ No			
☐ Yes. N	lame of Person Attach the Bar	nkruptcy Petition Prej	eparer's Notice, Declaration, and Signature (Official Form 119).

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing tee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtor and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce).
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor, in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
 - ■The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
 - (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
 - Any Funds received before filling shall be used for payment of court costs, filing fees, credit reports, credit counseling, postage, paper, copying and other related overhead costs.
 - (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
 - (c) The retainer is a flat fee for the services to be rendered during the Chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;

- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the Chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

[Remaining page intentionally left blank.]

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00.
- 2. In addition, the debtor will pay the filing fee required in the case and other expenses of \$310.00.
- 3. Before signing this agreement, the attorney has received, \$222.00 toward the flat fee, leaving a balance due of \$3,778.00; and \$0.00 for expenses, leaving a balance due for the filing fee of \$0.00.
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: March 15, 2017		
Signed:		
/s/ John Schaefer	/s/ Sandra Levitt	
John Schaefer	Sandra Levitt 6257558	
	Attorney for the Debtor(s)	
/s/ Cheryl A Schaefer	•	
Cheryl A Schaefer		
Debtor(s)		
Do not sign this agreement if the amo	unts are blank.	

Local Bankruptcy Form 23c

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B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In	John Schaefer Te Cheryl A Schaefer		Case No		
	Oliciyi A dollacici	Debtor(s)	Chapter	13	
	DISCLOSURE OF COMPE	NSATION OF ATTO	PNEV FOR D	FRTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2010 compensation paid to me within one year before the fili be rendered on behalf of the debtor(s) in contemplation	ing of the petition in bankruptcy	, or agreed to be pai	d to me, for services r	
	For legal services, I have agreed to accept		\$	4,000.00	
	Prior to the filing of this statement I have received			222.00	
	Balance Due		\$	3,778.00	
2.	\$310.00 of the filing fee has been paid.				
3.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5.	■ I have not agreed to share the above-disclosed com	pensation with any other person	unless they are men	mbers and associates of	f my law firm.
	☐ I have agreed to share the above-disclosed compensopy of the agreement, together with a list of the na				law firm. A
6.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:				
	 a. Analysis of the debtor's financial situation, and rend b. Preparation and filing of any petition, schedules, sta c. Representation of the debtor at the meeting of credit d. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and applications 522(f)(2)(A) for avoidance of liens on how 	atement of affairs and plan which tors and confirmation hearing, a reduce to market value; ex ons as needed; preparation	h may be required; nd any adjourned he emption planning	earings thereof;	filing of
	Outside counsel may be employed und	ler firm supervision, and pa	aid by our firm.		
7.	By agreement with the debtor(s), the above-disclosed for Representation of the debtors in any di			ry proceeding.	
		CERTIFICATION			
thi	I certify that the foregoing is a complete statement of an is bankruptcy proceeding.	ny agreement or arrangement fo	r payment to me for	representation of the	debtor(s) in
	March 15, 2017	/s/ Sandra Levitt			
	Date	Sandra Levitt 62 Signature of Attorn			
		Zalutsky & Pinsk			
		111 W. Washingt	ton		
		Suite 1550 Chicago, IL 6060	12		
		312-782-9792 Fa			
		admin@ZAPLaw	Firm.com		
		Name of law firm			

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United States Bankruptcy Court Northern District of Illinois

In re	John Schaefer Cheryl A Schaefer		Case No.	
	Cheryl A Schaeler	Debtor(s)	Chapter	13
	${f v}$	ERIFICATION OF CREDITOR M	MATRIX	
		Number of	f Creditors:	83
	The above-named Debtor(sour) knowledge.	s) hereby verifies that the list of credi	itors is true and	correct to the best of my
Date:	March 15, 2017	/s/ John Schaefer John Schaefer Signature of Debtor		
Date:	March 15, 2017	/s/ Cheryl A Schaefer Cheryl A Schaefer Signature of Debtor		

A/r Concepts 18-3 E Dundee Rd Barrington, IL 60010

A/R Concepts Inc. 18-3 E. Dundee Rd. Ste. 330 Barrington, IL 60010

Accounts Receivable Management Inc. P.O. Box 129
Thorofare, NJ 08086

Amazon Credit Plan Processing Center Des Moines, IA 50364

Americash Loans 880 Lee Street Suite 302 Des Plaines, IL 60016

Arnold Scott Harris 111 W. Jackson Blvd Suite 600 Chicago, IL 60604

ARS
P.O. Box 459079
Fort Lauderdale, FL 33345

ARS/Account Resolution Specialist Po Box 459079 Sunrise, FL 33345

Associated General Surgeons, SC 25 North Winfield Road Suite 410 Winfield, IL 60190

Atg Credit Llc 1700 W Cortland St Ste 2 Chicago, IL 60622 Avant Credit, Inc 640 N La Salle St Suite 535 Chicago, IL 60654

Bank Of America Nc4-105-03-14 Po Box 26012 Greensboro, NC 27410

Blitt & Gaines PC 661 Glenn Ave Wheeling, IL 60090

Cadence Medical Group PO Box 409 Carol Stream, IL 60197

Calvary Portfolio Services 500 Summit Lake Ste 400 Valhalla, NY 10595

Capital One Attn: Gen. Corr./Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Cardworks/CW Nexus Attn: Bankruptcy Po Box 9201 Old Bethpage, NY 11804

Catholic Cemeteries 1400 S. Wolf Road Hillside, IL 60162-2105

CBCS P.O. Box 2589 Columbus, OH 43216

Cda/Pontiac Attn:Bankruptcy Po Box 213 Streator, IL 61364 Central Dupage Emergency Phys P.O. Box 366 Hinsdale, IL 60522

Citifinancial 300 Saint Paul Pl Baltimore, MD 21202

City of Chicago Department of Finance P.O. Box 88292 Chicago, IL 60680

Comenity Bank/Catherines Po Box 18215 Columbus, OH 43218

Comenity Bank/Lane Bryant Attn: Bankruptcy Po Box 182125 Columbus, OH 43218

Consumer Portfolio Svc Attn: Bankruptcy 19500 Jamboree Rd Irvine, CA 92612

Corporate America Fcu Attn: Collections Dept 2075 Big Timber Rd Elgin, IL 60123

Credit First National Assoc Attn: BK Credit Operations Po Box 81315 Cleveland, OH 44181

Creditors Discount & Audit Company 415 East Main Street P.O. Box 213 Streator, IL 61364-0213

DSC Delbert McCarran Center I, 7125 Pollock Dr, Las Vegas, NV 89119 Fed Loan Sevicing Po Box 69184 Harrisburg, PA 17106

Firestone P.O. Box 81344 Cleveland, OH 44188-0344

Fst Premier 601 S Minneapolis Ave Sioux Falls, SD 57104

Great American Finance Attn: Bankruptcy 20 N Wacker Dr. Suite 2275 Chicago, IL 60606

Great Lake Roofing & Siding 738 W. Algonquin Rd. Arlington Heights, IL 60005

Grove Dental Associates P C Baron Collection 155 Revere Dr Northbrook, IL 60062

HCFS 3429 Regal Dr Alcoa, TN 37701

Heritage Elementary School 507 Arnold Ave. Streamwood, IL 60107

HRRG P.O. Box 8486 Pompano Beach, FL 33075

Hunt, Aranda & Subach 1035 S York R. Bensenville, IL 60106

ICS P.O. Box 1010 Tinley Park, IL 60477-9110 Illinois Tollways 2700 Ogden Ave. Downers Grove, IL 60515

Internal Revenue Service Dept of the Treasury P.O. Box 7346 Philadelphia, PA 19101

Joseph Mann & Creed 20600 Chagrin Blvd Ste. 550 Beachwood, OH 44122

Kohls/Capital One Kohls Credit Po Box 3043 Milwaukee, WI 53201

Malcolm S Gerald & Associates, Inc. 332 South Michigan Avenue Suite 600 Chicago, IL 60604

Merrick Bank Po Box 660702 Dallas, TX 75266

Midland Funding Attn: Bankruptcy Po Box 939069 San Diego, CA 92193

Midwest Emergency Associates P.O. Box 6500 Chicago, IL 60680

MiraMed Revenue Group Dept. 77304 PO Box 77000 Detroit, MI 48277-0304

MiraMed Revenue Group 360 E 22nd St Lombard, IL 60148-6408 Nationwide Credit & Collection, Inc 815 Commerce Drive Suite 270 Oak Brook, IL 60523

Nationwide Credit & Collection, Inc 815 Commerce Drive Suite 100 Oak Brook, IL 60523

Northland Group 7831 Glevroy Rd., Ste. 350 Edina, MN 55439

Northwestern Medicine 28155 Network Place Chicago, IL 60673-1281

Pediatric Eye Associates 3612 Lake Ave, 2C Wilmette, IL 60091

PLS 7300 N. Barrington Rd Hanover Park, IL 60133

PLS 7300 N. Barrington Rd. Hanover Park, IL 60133

Premier Bankcard PO BOX 2208 Vacaville, CA 95696

Radiological Consultants of Woodsto 520 E 22nd Street Lombard, IL 60148

Radiology Consultants of Woodstock 9410 Compubill Dr. Orland Park, IL 60462

Rise Credit Customer Support Po Box 101808 Fort Worth, TX 76185

Ronald Clemente DPM 1015 Wise Rd. Ste. 101 Schaumburg, IL 60193

Rushmore Service Center P.O. Box 5508 Sioux Falls, SD 57117

South Elgin High School 760 E. Main St. South South Elgin, IL 60177

Spot loan P.O. Box 927 Palatine, IL 60078

St. Alexius Medical Center 3040 W Salt Creek Ln, Arlington Heights, IL 60005

St. John the Evangelist 502 S. Park Blvd. Streamwood, IL 60107

Syncb/Sams Club Po Box 965064 Orlando, FL 32896

Synchrony Bank/Amazon Attn: Bankruptcy Po Box 956060 Orlando, FL 32896

Synchrony Bank/Disney Attn: Bankruptcy Po Box 956060 Orlando, FL 32896 Synchrony Bank/Walmart Attn: Bankruptcy Po Box 956060 Orlando, FL 32896

Target C/O Financial & Retail Srvs Mailstopn BT POB 9475 Minneapolis, MN 55440

U.S. Attorney's Office 219 S. Dearborn Chicago, IL 60602

Us Dept Ed Ecmc/Bankruptcy Po Box 16408 St Paul, MN 55116

US Dept of Education Attn: Bankruptcy Po Box 16448 Saint Paul, MN 55116

Village of Fox River Grove Photo Enforcement Program 75 Remittance Dr.; Ste 6658 Chicago, IL 60675

Village of Steamwood Water 301 E. Irving Park Rd. Streamwood, IL 60107

Wells Fargo Dealer Services Attn: Bankruptcy Po Box 19657 Irvine, CA 92623

Wells Fargo Hm Mortgag 8480 Stagecoach Cir Frederick, MD 21701

West Suburban Bank 711 South Meyers Road Lombard, IL 60148

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Winfield Laboratory Consulatants Dept 4408 Carol Stream, IL 60122

World Finance Corporat 108 Frederick St Greenville, SC 29607